Document Header Information

Document Type: Document VCH004244

Name: Trip Name:

Travel Authorization TAA00DCZ

Number: 10/16/14 TA Date:

USD Currency: Current **PAID**

Organization: EPAR09ORA Purpose:

Status: 4-SPEECH OR Document

Regional Administrator will do the Welcome Remarks and meet with the tribal leaders at the Annual

PRESENTATION TEMPORARY DUTY Tribal Conference in Sacramento, CA Detail: Type Code:

Traveler Profile

Name: BLUMENFELD, JARED E TID:

Duty Station: Organization: EPAR09ORA San Francisco

Office Address: Card: CARDHOLDER EXEMPT 75 HAWTHORNE STREET
SAN FRANCISCO, CA 94105 EMAIL: blumenfeld.jared@epa.gov Office Phone: 415-947-8702

Document Information

Trip Number: 1

Regional Administrator will do the Welcome Remarks and meet with the tribal leaders at the Annual Tribal Conference in Sacramento, CA Purpose:

Itinerary Locations

Itinerary Location Per Diem Rates From Purpose 10/15/14 10/15/14 SACRÁMENTO, CA 107.00 / 61.00

Document Totals Total Expenses: 182.98 Reimbursable Expenses: 182.98 Non-Reimbursable Expenses: .00 Advance Applied: .00 Net to Traveler: 168.23 Net to Government: .00 Pay to Charge Card: 14.75

Document Totals by Expense Category		
Expense Category	Cost	Advance Amount
Lodging & M&IE	45.75	.00
Mileage	102.48	.00
Misc Expense	20.00	.00
Transaction Fees	14.75	.00
Total Expenses:	182.98	.00

Trip 1 Deta	nils					
T.						
Expenses						
Trip#: 1		Total Non-Per Diem Expenses:	137.23	Total Per Diem Expenses:	45.75	
Date	Description	Category	Cost	Pay Method	Per Diem	
10/15/2014	M&IE	Lodging & M&IE	45.75	PÉRSONAL	*	
10/15/2014	POV - Local	Mileage	102.48	PERSONAL		
10/15/2014	Tolls (HWY, Bridge, ETC)	Misc Expense	12.00	PERSONAL		
10/15/2014	Parking	Misc Expense	8.00	PERSONAL		
10/16/2014	TDY Voucher Fee	Transaction Fees	14.75	GOVCC		
Per Diem A	Per Diem Allowances					
Trip#: 1	rip#: 1 Total Per Diem Allowances: 4					

Date	Rate	Ldg Cost	Ldg Allowed	M&IE Cost	M&IE Allowed	B L D Conf%
10/15/2014	107.00/61.00	0.00	0.00	45.75	45.75	

Payment Deta	ail Information						
Organization	Label	Accounting String	Payment Method	Amount			
EPAR09ORA	15 ORA ME090900	RA5.20152016.B.09AA.ZZZJE5.ME090900.	GÓVCC	14.75			
EPAR09ORA	15 ORA ME090900	RA5.20152016.B.09AA.ZZZJE5.ME090900.	PERSONAL	168.23			
Totals by Lab	oel						
EPAR09ORA	15 ORA ME090900 Total	RA5.20152016.B.09AA.ZZZJE5.ME090900.		182.98			
Totals by Pay	Totals by Payment Method						
			GOVCC Total	14.75			
			PERSONAL Total	168.23			

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STATUS	DATE	TIME	SIGNATURE NAME	REASON
CREATED	10/16/2014	2:40PMEST	GAUDARIO, MARY ABIGAIL C	
SIGNED	10/16/2014	4:47PMEST	GAUDARIO, MARY ABIGAIL C	
SIGNED	10/16/2014	5:42PMEST	BLUMENFELD, JARED E	
ADJUSTED	10/17/2014	2:56PMEST	GAUDARIO, MARY ABIGAIL C	
ADJUSTED	10/20/2014	2:59PMEST	HACKER, ALEXIS STRAUSS	
AUTHORIZED	10/20/2014	2:59PMEST	HACKER, ALEXIS STRAUSS	
ADJUSTED	10/29/2014	1:16PMEST	TURNER, STEVE K	
APPROVED	10/29/2014	1:19PMEST	TURNER, STEVE K	
PENDING	10/29/2014	1:19PMEST	SYSUTILITY	
OFFSETTING OBLIGATED	10/30/2014	3:10AMEST	One, EAI User	
PENDING	10/30/2014	3:10AMEST	One, EAI User	
PAID	10/30/2014	5:10AMEST	One, EAI User	
I certify that the electronic sign	natures listed above	e are valid and o	n file	

Document Signatures	
Traveler/Preparer Name:	
Traveler/Preparer Signature:	
Date:	
Approver Name:	
Approver Name: Approver Signature:	
Date:	